

13.c. Preventive services:

- Preventive services are health services provided to a recipient to avoid or minimize the occurrence or recurrence of illness, infection, disability, or to provide care for pregnancy.
- Services must be provided to the recipient on a face-to-face basis.
- The services must affect the recipient's care rather than the recipient's environment.
- The service must not be otherwise available to the recipient without cost as part of another program funded by a government or private agency.
- The service must not be part of another covered service.
- The service must be to avoid or minimize an illness, infection, or disability which will respond to treatment.
- The service must be generally accepted by the provider's professional peer group as a safe and effective means to avoid or minimize the illness, infection, or disability.
- Prior authorized cardiac rehabilitation services are covered preventive services with the following limitations:
  - 1) The services must be defined services whereby a physician is on the premises of the active program at all times in which the facility is opened.
  - 2) The services must be conducted in an area set aside for the exclusive use of the program while it is in session.
  - 3) The service must be a Medicare approved cardiac rehabilitation program.

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13.c. Preventive services: (continued)

- The following services may be offered within the cardiac program as a covered service:
  - 1) diagnostic testing - stress testing;
  - 2) ECG monitoring;
  - 3) other reasonable and necessary diagnostic services;
  - 4) psychotherapy,
  - 5) exercise therapy.
- The following cardiac rehabilitation services are not eligible for payment:
  - 1) services provided without the direct on premises supervision of a physician;
  - 2) physical therapy and occupational therapy in connection with a cardiac rehabilitation program unless there is also a diagnosis of a non-cardiac condition requiring such therapy;
  - 3) patient education.
- The following preventative services are not eligible for payment:
  - 1) service that is only for a vocational purpose or an educational purpose that is not health related;  
and
  - 2) service dealing with external, social, or environmental factors that do not directly address the recipient's physical or mental health.

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13.d. Rehabilitative services.

**Rehabilitative services** are limited to:

- (1) Services provided under the recommendation of a physician. The therapeutic treatment must be a part of the recipient's plan of care; and
- (2) Services that are medically necessary and the least expensive, appropriate alternative.

Coverage of **day treatment services for mental illness** is limited to:

- (1) Services recommended by a psychiatrist, licensed psychologist, licensed independent clinical social worker, registered nurse with a master's degree and certificate from the American Nurses Association as a clinical specialist in psychiatric nursing or mental health; licensed psychological practitioner; or licensed marriage or family counselor in a community mental health center. Licensed marriage and family counselors are subject to the limitations in item 6.d.A.;
- (2) Services supervised by an enrolled psychiatrist or other mental health professional listed in item 6.d.A.;
- (3) Services provided in or by one of the following:
  - (A) Joint Commission on the Accreditation of Healthcare Organizations approved outpatient hospital;
  - (B) Community Mental Health Center;
  - (C) County contracted day treatment provider.
- (4) Services provided up to 16 hours per week.

13.d. Rehabilitative services. (continued)

Rehabilitative services provided for **chemical abuse** are limited to:

- (1) **Primary rehabilitation program:** A licensed chemical dependency rehabilitation program that provides intensive, primary therapeutic services to clients who do not require detoxification. Primary rehabilitation programs provide at least 30 hours a week per client of chemical dependency services including group and individual counseling, and other services specific to chemical dependency rehabilitation.
- (2) **Outpatient rehabilitation program:** A program of at least 10 hours of therapy/counseling, including group, collateral, and individual therapy/counseling and may be provided to a recipient while the recipient resides in a supervised living facility board and lodging facility, or the recipient's own home.
- (3) **Extended rehabilitation program:** A licensed chemical dependency rehabilitation program that offers an extended, long term combination of in-house chemical dependency services and community ancillary resources. An extended rehabilitation program provides an average of 15 hours a week per client of chemical dependency services including group and individual counseling, client education, and other services specific to chemical dependency rehabilitation.
- (4) **Transitional rehabilitation program:** A licensed chemical dependency rehabilitation program that is offered in a transitional semi-independent living arrangement with an emphasis on aftercare, community ancillary services, and securing employment. A transitional rehabilitation program provides at least five hours a week per client of rehabilitation services which may include group counseling, employment counseling, and individual counseling.

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13.d. Rehabilitative services. (continued)

Collateral counseling involves counseling provided directly or indirectly to the recipient through the involvement of the recipient's or significant others in the counseling process. Presence of the recipient in the counseling sessions is not necessarily required. However, when the recipient is present, reimbursement for collateral counseling and individual or group counseling for the same session is not allowed.

Rehabilitative services must be restorative or specialized maintenance therapy services and include medical treatment and physical or psychological therapy. These services are limited to services provided under the recommendation of a physician and must be a part of the recipient's plan of care.

Provider eligibility is limited to programs licensed by the Department of Human Services under Minnesota Rules, parts 9530.4100 through 9530.4450 (Rule 35) and Minnesota Rules, parts 9530.5000 through 9530.6400 (Rule 43) or the American Indian programs, that if located outside of the federally recognized tribal lands would be required to be licensed.

**Rehabilitative restorative and specialized maintenance physical therapy, occupational therapy, audiology, and speech-language pathology services:**

Provider eligibility is limited to:

- (1) Rehabilitative agencies that are Medicare certified;
- (2) Comprehensive outpatient rehabilitation facilities (CORFs) that are Medicare certified; and
- (3) Long-term care facilities that are Medicare certified as outpatient therapy providers.

Coverage is limited to services within the limitations provided under Items 11.a. to 11.c., Physical therapy, Occupational therapy, and Services for individuals with Speech, Hearing, and Language Disorders, except:

- (1) Services that are provided by a rehabilitation agency that take place in a sheltered workshop in a day training and habilitation center or a residential or group home which is an affiliate of the

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13.d. Rehabilitative services. (continued)

rehabilitation agency are not covered.

- (2) Social and vocational adjustment services are not covered, but must be provided as an unreimbursed adjunct to the covered services.

Covered **respiratory therapy services** are those prescribed by a physician and provided by a qualified respiratory therapist.

**Rehabilitative services identified in an Individualized Education Plan** and provided to handicapped children during the school day.

Covered services include speech-language pathology and audiology services, psychological services, physical and occupational therapy, medical counseling and services for diagnostic and evaluation purposes, private duty nursing and personal care services, and nursing services which are essential and adjunctive to the above services, such as catheterization, suctioning, tube feedings, medication administration and ventilator care. The services must meet all the requirements otherwise applicable if the service had been provided by a qualified, enrolled provider other than a school district, in the following areas: medical necessity, physician's orders, documentation, personnel qualifications, and invoicing and prior authorization requirements. In order to provide private duty nursing or personal care services, the recipient or responsible party must provide written authorization in the care plan identifying the chosen provider and the daily amount of services to be used at school.

School districts must secure informed consent to bill for each type of rehabilitative service. For the purposes of this item, "informed consent" means a written agreement, or an agreement as documented in the record, by a recipient or responsible party in accordance with Minnesota Statutes, section 13.05, subdivision 4, paragraph (d) and Minnesota Statutes, section 256B.77, subdivision 2, paragraph (p).

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13.d. Rehabilitative services. (continued)

Covered services must be furnished by the following personnel:

- (1) Audiologists who have a current certification of clinical competence from the American Speech-Language-Hearing Association or have completed the academic program and are acquiring supervised work experience to qualify for the certificate;
- (2) Occupational therapists who are currently certified by the American Occupational Therapy Certification Board;
- (3) Physical therapists who have graduated from a program of physical therapy approved by both the Council on Medical Education of the American Medical Association and the American Physical Therapy Association or its equivalent. Physical therapists must meet state licensure requirements when they are developed.
- (4) Speech-language pathologists who:
  - (a) hold a masters degree in speech-language pathology;
  - (b) are licensed by the state as educational speech-language pathologists; and
  - (c) either have a certificate of clinical competence from the American Speech-Language-Hearing Association, have completed the equivalent educational requirements and work experience necessary for the certificate, or have completed the academic program and are acquiring supervised work experience to qualify for the certificate;
- (5) Mental health professionals who have a current Minnesota license as a licensed psychologist, psychiatrist, licensed independent clinical social workers, a registered nurse with a master's degree and certificate from the American Nurses Association as a clinical specialist in psychiatric nursing or mental health; licensed psychological practitioner; or licensed marriage or family counselor in a community mental health center. Licensed marriage and family counselors are subject to the limitations in item 6.d.A.;

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13.d. Rehabilitative services. (continued)

- (6) Physicians who have a current Minnesota license as a physician; or
- (7) Registered nurses and licensed practical nurses who have a current Minnesota license as a registered nurse or practical nurse; or
- (8) Personal care providers who meet the requirements of item 26 of this attachment.



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14. Services for individuals age 65 or older in institutions for mental diseases:

- See Items 14.a. to 14.c.

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14.a. Services for individuals age 65 or older in institutions for mental diseases - inpatient hospital services:

- Same service limitations apply as those listed in Item 1, Inpatient hospital services.